

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional)																		
<b>FY 2005</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		PP000338.0105 (2300-0338.02)																		
Application Number: 10/611,398		Filed: June 30, 2003																		
For IMMUNOGENIC DETOXIFIED MUTANTS OF CHOLERA TOXIN																				
Art Unit: 1645	Examiner: J. Graser																			
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th><u>Fee</u></th> <th><u>Small Entity Fee</u></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$130</td> <td>\$65 <u>\$ 130.00</u></td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$490</td> <td>\$245 <u>\$</u></td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$1110</td> <td>\$555 <u>\$</u></td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1730</td> <td>\$865 <u>\$</u></td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2350</td> <td>\$1175 <u>\$</u></td> </tr> </tbody> </table> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  <input type="checkbox"/> A check including the amount of the fee is enclosed.  <input checked="" type="checkbox"/> Payment by credit card.  <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>18-1648</u>.  <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b> </p> <p>I am the <input type="checkbox"/> applicant/inventor.  <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>41,411</u>  <input type="checkbox"/> attorney or agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34 _____</p> <p><u>Dahna S. Pasternak</u> Signature</p> <p>October 27, 2008 Date</p> <p><u>Dahna S. Pasternak</u> Typed or printed name</p> <p>(650) 493-3400 Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>				<u>Fee</u>	<u>Small Entity Fee</u>	<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65 <u>\$ 130.00</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245 <u>\$</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555 <u>\$</u>	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865 <u>\$</u>	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175 <u>\$</u>
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